

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. <div style="font-size: 1.2em;">09/827433</div>	FILING DATE		
							APPLICANT(S)			
CLAIMS										
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			★		
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	
1							51			
2							52			
3							53			
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46							96			
47							97			
48							98			
49							99			
50							100			
TOTAL IND.		↓		↓		↓	TOTAL IND.		↓	
TOTAL DEP.		←		←		←	TOTAL DEP.		←	
TOTAL CLAIMS							TOTAL CLAIMS			

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-1360 (REV. 3-78)

U.S. DEPARTMENT OF COMMERCE
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